## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Dr		4,122-00
O.I.P.E. CLASSIFIER	:- 2/	13/	3/2
FORMALITY REVIEW	:-3	Sc H	06/21/00
RESPONSE FORMALITY REVIEW			007007

## **INDEX OF CLAIMS**

•	Rejected	N	Non-elected
=	Allowed	- 1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

Claim		
Claim Date	Claim Date	Claim Date
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40	90	140
1-141		141
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